CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruct	ion Guide explains how to co	omplete this form.	1 Filer ID (Ethics Commis 00090478		2 Total pages	s filed: 30
3 CANDIDATE / OFFICEHOLDE NAME	MS / MRS / MR	FIRST David		MI	Date Received	CALLY FILED
	NICKNAME	LAST Chincanchan		SUFFIX	10/26/2020	
4 CANDIDATE / OFFICEHOLDE MAILING ADDRESS	ADDRESS / PO BOX; 4908 Parell Path	APT / SUITE #; CIT	- Y;	ZIP CODE	Date Hand-delivere	d or Date Postmarked Amount
Change of Addr	Austin, TX 78744				Date Processed	
					Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Laura		MI		
	NICKNAME	LAST Hernandez		SUFFIX		
6 CAMPAIGN	STREET ADDRESS (NO) PO BOX PLEASE).	ΔΡ	Γ / SUITE #; CIT`	/· S	TATE; ZIP CODE
TREASURER ADDRESS	6000 Lonesome Valle		711	1700H2 #, OH	ι, σ	
(Residence or Busin	Austin, TX 78731					
7 CAMPAIGN TREASURER PHONE	AREA CODE P (512) 920-4626	PHONE NUMBER I	EXTENSION			
8 REPORT TYPE	January 15	30th day before		Runoff	appointment (d	campaign treasurer officeholder only)
	July 15	X 8th day before	election	Exceeded \$500 limit	Final Report (A	Attach C/OH-FR)
9 PERIOD COVERED	Month Day You 09/25/2020	ear Th	HROUGH	Month Day 10/24/20		
10 ELECTION	ELECTION DAT Month Day Yo 11/03/2020	ear P	Primary General	ELECTION TYPE Runoff Special	Other	
11 OFFICE	OFFICE HELD (if any)	1		12 OFFICE SOUGH	IT (if known)	
	1	GO 1	TO PAGE 2	,		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 30

13 C / OH NAME	Chincanchan, David			14 Filer ID 00090478	(Ethics Cor	nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditure	s may have been made v	xpenditures made by political without the candidate's or offic ormation only if they receive r	ceholder's kı	nowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAM	ME			
	GENERAL					
		COMMITTEE ADI	DRESS			
	SPECIFIC					
		COMMITTEE CAI	MPAIGN TREASURER N	IAME		
		COMMITTEE CAI	MPAIGN TREASURER A	DDRESS		
16 CONTRIBUTION TOTALS			NS OF \$50 OR LESS (O ANS), UNLESS ITEMIZE	THER THAN PLEDGES, ED	\$	338.00
	LOANS)	\$	12,102.11			
EXPENDITURE TOTALS	NLESS ITEMIZED	\$	325.62			
	4. TOTAL POLITIC	AL EXPENDITURI	ES		\$	39,373.37
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		NS MAINTAINED AS OF	THE LAST DAY OF THE	\$	59,434.92
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR		ALL OUTSTANDING LOA	NS AS OF THE LAST DAY	\$	0.00
17 AFFADAVIT						
				penalty of perjury, that the a ludes all information required Code.		
				David Chincanchan		
			Sign	ature of Candidate or Officeh	older	
AFFIX NO	TARY STAMP / SEAL ABO	OVE				
Sworn to and subs	cribed before me, by the s	aid		, this the		day
of	, 20, to ce	ertify which, witness	s my hand and seal of off	ice.		
Signature of office	cer administering	Printed name	of officer administering	Title of offic	er administe	ring oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				3 of 30
18 FILER NAM Chincanch		19 Filer ID 00090478	(Ethics Com	mission Filers)
20 SCHEDULE NAME OF S			SUBTO	OTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	12,102.11
2. X	\$	0.00		
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4. X	SCHEDULE E: LOANS		\$	0.00
5. X	\$	39,373.37		
6. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	0.00
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	
			•	

	MONET	ARY POLITICAL (CONTRIBUTION	JNS		SCHEDUL	E A1
	The Instru	ction Guide explains hov	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/10 Rpt: 4/30	
2	FILER NAME Chincanchar	n, David			3	Filer ID (Ethics Commission 00090478	n Filers)
4	Date 10/05/2020	 5 Full name of contributor Arndt, Timothy 6 Contributor address; City; S 3915 Becker Ave)	7	Amount of Contribution (\$)	\$50.00
L		Austin, TX 78751					
8	Principal occu Project Mana	pation / Job title (See Instruction ager	5)	9 Employer (See Instructions360	s)		
	Date 09/25/2020	Full name of contributor Austin Firefighters Assoc Contributor address; City; S 7537 Cameron Rd Austin, TX 78752				Amount of Contribution (\$)	\$400.00
	Principal occu	pation / Job title (See Instruction:	5)	Employer (See Instructions	s)		
	Date 09/30/2020	Full name of contributor Bope, Flannery Contributor address; City; S 604 N Bluff Dr #231	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$50.00
	Principal occu	Austin, TX 78745 pation / Job title (See Instruction:	s)	Employer (See Instructions	s)		
		al Marketing Manager	-,	Concierge Auctions	-,		
	Date 10/21/2020	Full name of contributor Bukowski, Sean Contributor address; City; S 1601 Rio Grande Suite 3 Austin, TX 78701			•	Amount of Contribution (\$)	\$400.00
	Principal occu Lawyer	pation / Job title (See Instruction	5)	Employer (See Instructions Bukowski Law Firm	<u>I</u> S)		
	Date 10/13/2020	Full name of contributor Chaney, Marvin Contributor address; City; S 7220 Brick Slope Path Austin, TX 78744	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$100.00
	Principal occu Manager	pation / Job title (See Instruction:	5)	Employer (See Instructions State of Texas	5)		
				1			

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1			
	The Instru	ction Guide explains how t	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/10 Rpt: 5/30			
2	FILER NAME Chincanchai	n, David			3	Filer ID (Ethics Commission 00090478	n Filers)		
4	Date 10/22/2020	 5 Full name of contributor Choi, Miri 6 Contributor address; City; Stat 6500 Lost Horizon Drive 			7	Amount of Contribution (\$)	\$400.00		
_	Driverinal con-	Austin, TX 78759	1	O Francisco (Coo Instructions	<u></u>				
8	Researcher	pation / Job title (See Instructions)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	9 Employer (See Instructions University of Texas	5)				
	Date 09/29/2020	Full name of contributor Coon, Samuel Contributor address; City; Stat 3939 Bee Caves Road Ste West Lake Hills, TX 78746-	C100)		Amount of Contribution (\$)	\$400.00		
				Employer (See Instructions Southern Methodist Univ		sity			
	Date 10/16/2020	Full name of contributor Desai, Yaman Contributor address; City; Stat 2660 N Haskell Ave, Apt. 33				Amount of Contribution (\$)	\$50.00		
	Principal occu	Dallas, TX 75204 pation / Job title (See Instructions)	T	Employer (See Instructions	<u> </u> ;)				
	Lawyer	,		Lynn Pinker Hurst Schw		mann			
	Date 10/13/2020	Full name of contributor Deshotel, Joe Contributor address; City; Stat 1206 A Maple)		Amount of Contribution (\$)	\$105.58		
	Principal occu	AUSTIN, TX 78702 pation / Job title (See Instructions)		Employer (See Instructions VoteMAP	<u> </u> 5)				
	Date 10/21/2020	Full name of contributor Farrell, Mark Contributor address; City; Stat 3702 Holland Avenue Dallas, TX 75219	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$800.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	5)				
			1						

	MONEI	ARY POLITICAL C	ONTRIBUTIO	'IN	15		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 3/10 Rpt: 6/30	
2	FILER NAME Chincancha	n, David				3	Filer ID (Ethics Commission 00090478	n Filers)
4	Date 10/09/2020	5 Full name of contributorGalindo, Cid6 Contributor address; City; Stat	out-of-state PAC (ID#:			7	Amount of Contribution (\$)	\$250.00
		411 Brazos St, Ste 99	co, <u>-</u> . p					
_	· · ·	Austin, TX 78701	-	_	- · · · · · · · · · · · · · · · · · · ·	$\overline{\Gamma}$		
8	Real Estate	pation / Job title (See Instructions)		9	Employer (See Instructions Self	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/28/2020	Garibay, Montserrat						\$100.00
		Contributor address; City; Sta	te; Zip Code					
		1401 cripple creek						
		Austin TV 707E0						
	Dringing aggr	Austin, TX 78758			Employer (Coo Instructions	<u>, </u>		
	Secretary-Ti	pation / Job title (See Instructions)			Employer (See Instructions Texas AFLCIO)		
			7		,	_	Associated Contribution (ft)	
	Date 10/21/2020	Full name of contributor [Griggs, John	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$400.00
	10/21/2020							\$400.00
		Contributor address; City; Star	te; Zip Code					
		6438 Stefani Dr						
		Dallas, TX 75225						
	Principal occu	pation / Job title (See Instructions)			Employer (See Instructions	<u> </u>		
	Co-CEO				Presidium			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)	
	10/02/2020	HBA HOME PAC					(1)	\$250.00
		Contributor address; City; Sta						
		8140 Exchange Dr	,р					
		J						
		Austin, TX 78754				_		
	Principal occu	pation / Job title (See Instructions)			Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/25/2020	HERNANDEZ, BENJAMIN						\$50.00
		Contributor address; City; Sta	te; Zip Code					
		928, North Cherry St						
		CAN ANTONIO TV 70000						
	Dringing!	SAN ANTONIO, TX 78202	ı		Employer (Coo least-resting	·/		
	Chef	pation / Job title (See Instructions)			Employer (See Instructions Club at Sonterra)		
	CHEI				Ciub at Suitella			

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS	SCHEDULE A	41
	The Instruc	ction Guide explains how t	o complete this fo	orm.	1 Total pages Schedule A1: Sch: 4/10 Rpt: 7/30	
2	FILER NAME Chincanchar	ı, David			3 Filer ID (Ethics Commission File 00090478	ers)
4	Date 10/01/2020	 Full name of contributor Haenschen, Katherine Contributor address; City; State 1850 Beacon Street, Apt 50)	7 Amount of Contribution (\$)	\$50.00
8		Brookline, MA 02445 pation / Job title (See Instructions) PROFESSOR		Employer (See Instructions NORTHEASTERN UNIV		
	Date 10/22/2020	Full name of contributor [Islam, Rashed Contributor address; City; Stat 11901 Palisades Pkwy Austin, TX 78732	out-of-state PAC (ID#: e; Zip Code		Amount of Contribution (\$) \$2	200.00
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions HDR)	
	Date 10/22/2020	Full name of contributor Jung, Richard Contributor address; City; Stat 6500 Lost Horizon Drive Austin, TX 78759	out-of-state PAC (ID#: e; Zip Code		Amount of Contribution (\$) \$4	400.00
	Principal occu General Cou	pation / Job title (See Instructions)		Employer (See Instructions Tso Delivery, Inc.)	
	Date 10/22/2020	Full name of contributor Khataw, Ali Contributor address; City; Stat 7914 Bee Caves Rd Austin, TX 78746	out-of-state PAC (ID#:e; Zip Code		Amount of Contribution (\$) \$2	200.00
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions Encotech		
	Date 10/22/2020	Full name of contributor Kim, Paul Contributor address; City; Stat 10524 Roy Butler Dr Austin, TX 78717	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	400.00
	Principal occup business own	pation / Job title (See Instructions) ner		Employer (See Instructions ATX Environmental Solu		

	MONEI	ARY POLITICAL C	ONTRIBUTIO	N/S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/10 Rpt: 8/30	
2	FILER NAME Chincanchar	n, David			3	Filer ID (Ethics Commission 00090478	n Filers)
4	Date 10/12/2020	5 Full name of contributor Lee, Robert6 Contributor address; City; St)	7	Amount of Contribution (\$)	\$400.00
		98 San Jacinto Blvd Fsr unit 2903 Austin, TX 78701					
8	Principal occu CEO	pation / Job title (See Instructions)	9 Employer (See Instructions Pearlstone partners	s)		
	Date 10/14/2020	Full name of contributor Liberal Austin Democrats Contributor address; City; St PO Box 49712	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$250.00
	Principal occu	Austin, TX 49712 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 10/09/2020	Full name of contributor Lorenz, Perry Contributor address; City; St 1311-a East 6th st	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$400.00
	'	Austin, TX 78702 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	real estate			Self	_		
	Date 10/15/2020	Full name of contributor Lubomudrov, Andrei Contributor address; City; St 5607 Westminster Dr)	-	Amount of Contribution (\$)	\$105.58
		Austin, TX 78723					
	Principal occu Planner	pation / Job title (See Instructions)	Employer (See Instructions City of Austin	s)		
	Date 09/25/2020	Full name of contributor Martin, Matthew Contributor address; City; St 6810 Deatonhill Dr	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$400.00
		Austin, TX 78745					
	Principal occu Real Estate	pation / Job title (See Instructions Agent)	Employer (See Instructions Jane Byrd Properties In		national LLC	

	MONET	ARY POLITICAL CONTRIBUTIO	N	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	ori	m.	1	Total pages Schedule A1: Sch: 6/10 Rpt: 9/30	
2	FILER NAME Chincanchar	n, David			3	Filer ID (Ethics Commission 00090478	n Filers)
4	Date 10/08/2020	 Full name of contributor			7	Amount of Contribution (\$)	\$400.00
8	Principal occu Vice Preside	· · · · · · · · · · · · · · · · · · ·	9	Employer (See Instructions Karlin Real Estate	<u> </u> s)		
	Date 10/21/2020	Full name of contributor out-of-state PAC (ID#:_ Meza, Matthew Contributor address; City; State; Zip Code 1601 Rio Grande St., 300 Austin, TX 78701			•	Amount of Contribution (\$)	\$400.00
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions Presidium	s)		
	Date 10/21/2020	Full name of contributor out-of-state PAC (ID#:_ Moceri, Cross Contributor address; City; State; Zip Code 1601 Rio Grande St. Suite 300 Austin, TX 78701)	•	Amount of Contribution (\$)	\$400.00
	Principal occu Real estate	pation / Job title (See Instructions)		Employer (See Instructions self	<u> </u>		
	Date 10/21/2020	Full name of contributor out-of-state PAC (ID#:_ Moceri, Susan Contributor address; City; State; Zip Code 1601 Rio Grande St. Suite 300 Austin, TX 78701)		Amount of Contribution (\$)	\$400.00
	Principal occu N/A	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date 10/22/2020	Full name of contributor out-of-state PAC (ID#:_Moledina, Ahmed Contributor address; City; State; Zip Code 9802 Patrice Dr Austin, TX 78750			•	Amount of Contribution (\$)	\$400.00
	Principal occup Business Ow	pation / Job title (See Instructions) /ner		Employer (See Instructions SOAL Technologies	s)		

	MONEI	ARY POLITICAL CONTRIBUTION	SCHEDULE A1				
	The Instru	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 7/10 Rpt: 10/30	
2	FILER NAME Chincanchar	n David			3	Filer ID (Ethics Commission 00090478	n Filers)
1	Date	5 Full name of contributor out-of-state PAC (ID#:)	_	Amount of Contribution (\$)	
-	09/25/2020	Mussey, Sarah			ľ	Amount of Continuation (4)	\$400.00
		6 Contributor address; City; State; Zip Code 6810 Deatonhill Dr					
		Austin, TX 78745					
8	Principal occu Homemaker	pation / Job title (See Instructions)	9	Employer (See Instructions None	5)		
	Date	Full name of contributor	<u> </u>		Π	Amount of Contribution (\$)	
	10/19/2020	Mustafa, Muhammad				Amount of Continuation (4)	\$100.00
	Contributor address; City; State; Zip Code						
		10016 Lavon Bend					
		Austin, TX 78717					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Civil Engineer HVJ South Central Tex				as -	M&J, Inc.	
	Date	Full name of contributor ut-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	10/08/2020	Pompa, Phillip					\$250.00
		Contributor address; City; State; Zip Code					
		8113 Amelia Cove					
		Austin, TX 78750					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	CEO			Work4Workers.com			
	Date	Full name of contributor ut-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	10/06/2020	Reagan, Billy					\$400.00
		Contributor address; City; State; Zip Code					
		7301 Burleson Rd					
		Ausitn, TX 78744					
	Principal occu Advertising	pation / Job title (See Instructions)		Employer (See Instructions RNA	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	10/12/2020	Reynolds, Graham					\$50.00
		Contributor address; City; State; Zip Code					
		3010 E 14th 1/2 St					
		Austin, TX 78702					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Composer-B	andleader		Self			
			_				

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this f	orm		1	Total pages Schedule A1: Sch: 8/10 Rpt: 11/30			
2	FILER NAME Chincanchar	n, David			3	Filer ID (Ethics Commission 00090478	ı Filers)		
4	Date 09/25/2020	 5 Full name of contributor out-of-state PAC (ID#:_Rooney, John 6 Contributor address; City; State; Zip Code 312 E 43rd St, Apt 103)	7	Amount of Contribution (\$)	\$50.00		
8	Principal occu Program Mai	Austin, TX 78751 pation / Job title (See Instructions) nager		Employer (See Instructions Hill Country Alliance)				
	Date 10/07/2020	Full name of contributor out-of-state PAC (ID#:_Stone, Rachel Contributor address; City; State; Zip Code 913 NILE ST AUSTIN, TX 78702				Amount of Contribution (\$)	\$400.00		
	Principal occu lawyer	pation / Job title (See Instructions)		Employer (See Instructions GNDC)				
	Date 10/05/2020	Full name of contributor out-of-state PAC (ID#:_ Stonewall Democrats of Austin PAC Contributor address; City; State; Zip Code PO Box 40898)		Amount of Contribution (\$)	\$100.00		
	Principal occu	Austin, TX 78704 pation / Job title (See Instructions)	E	Employer (See Instructions)				
	Date 10/12/2020	Contributor address; City; State; Zip Code 1710 WATERSTON AVE				Amount of Contribution (\$)	\$50.00		
	Principal occu Research As	AUSTIN, TX 78703 pation / Job title (See Instructions) ssociate		Employer (See Instructions The University of Texas		Austin			
	Date 09/25/2020	Full name of contributor out-of-state PAC (ID#:_ Tabrizi, Dona Contributor address; City; State; Zip Code 1102 Claire Ave Austin, TX 78703)		Amount of Contribution (\$)	\$200.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions V/a)				
			•						

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1		
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 9/10 Rpt: 12/30	
2	FILER NAME Chincanchan	, David		3	Filer ID (Ethics Commission 00090478	n Filers)
4	Date 09/25/2020	 Full name of contributor		7	Amount of Contribution (\$)	\$400.00
8	Principal occu	Metairie, TX 70003 Dation / Job title (See Instructions)	9 Employer (See Instructions	 s)		
	Date 09/25/2020	Full name of contributor out-of-state PAC (ID#: Turner, Scott Contributor address; City; State; Zip Code 3201 Sunny Ln Austin, TX 78731			Amount of Contribution (\$)	\$100.00
	Principal occup	pation / Job title (See Instructions)	Employer (See Instructions self	5)		
	Date 10/06/2020	Full name of contributor out-of-state PAC (ID#: Walker, Heyden Contributor address; City; State; Zip Code 6006 Cary Dr			Amount of Contribution (\$)	\$52.95
		Austin, TX 78757 pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 10/20/2020	Full name of contributor out-of-state PAC (ID#:	Black + Vernooy		Amount of Contribution (\$)	\$50.00
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See Instructions Metcalfe Wolff Stuart &		lliams	
	Date 10/17/2020	Full name of contributor out-of-state PAC (ID#: Zapata, Luis Contributor address; City; State; Zip Code 630 kingfisher creek dr Austin, TX 78748			Amount of Contribution (\$)	\$100.00
	Principal occup Music produc	pation / Job title (See Instructions) cer	Employer (See Instructions Specialeventslive.com	5)		
			,			

	MONET	ARY POLITICAL CONTRIBUT	ΠΟΙ	NS		SCHEDULE A1
	The Instru	ction Guide explains how to complete thi	1	Total pages Schedule A1: Sch: 10/10 Rpt: 13/30		
2	FILER NAME Chincancha				3	Filer ID (Ethics Commission Filers) 00090478
4	Date 10/21/2020 5 Full name of contributor out-of-state PAC (ID#:) comstock, veronica 6 Contributor address; City; State; Zip Code 3103 Loyola Lane Austin, TX 78723				7	Amount of Contribution (\$) \$50.00
8	Principal occur retired	pation / Job title (See Instructions)	g	Employer (See Instructions retired	5)	
	Date Full name of contributor out-of-state PAC (ID#:) 10/09/2020 espinoza, edward Contributor address; City; State; Zip Code PO Box 160233 Austin, TX 78716)		Amount of Contribution (\$) \$400.00
	Principal occupation / Job title (See Instructions) Executive Director Employer (See Instructions) Progress Texas					

	JTIONS			SCHEDULE B
The Instruction Guide ex	plains how to comple	ete this form.	1 Total pages Sc Sch: 1/1 Rpt:	
2 FILER NAME				Ethics Commission Filers)
Chincanchan, David			00090478	
TOTAL OF UNITEMIZED PLED	GES		\$	0.00
5 Date 6 Full name of pledgor	out-of-state PAC (ID#:		_) 8 Amount of pledge (\$)	9 In-kind description (If applicable)
7 Pledgor Address;	City; State; Zip Code			
I Principal occupation / Job title (See Instr	ructions)	11 Employer (See In		·

	LOANS					SCHEDULE E		
	The Instruction	The Instruction Guide explains how to complete this form. 1 Total pag Sch: 1/1						
2	FILER NAME Chincanchan, Da	avid			3 Filer ID 000904	(Ethics Commission Filers)		
4	TOTAL OF UN	IITEMIZED LOANS				\$ 0.00		
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:)	9 Loan Amount (\$)		
6	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code		10 Interest Rate		
						11 Maturity Date		
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Inst	ructions)			
14	Description of Coll	ateral		15 Check if personal for	unds were deposited	d into political account (See Instructions)		
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaranteed (\$)		
	not applicable	18 Guarantor address; City;	State;	Zip Code				
20	Principal occupation	on		21 Employer (See Inst	ructions)			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 1/15 Rpt: 16/30	Chincanchan, David 00090478	
4 Date	5 Payee name	
09/30/2020	A+G Digital	
6 Amount (\$) \$3,500.00	7 Payee address; City; State; Zip Code 1318 Minerva Rd Ann Arbor, MI 48104	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	Τ
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
10/14/2020	A+G Digital	
Amount (\$)	Payee address; City; State; Zip Code	
\$500.00	1318 Minerva Rd	
	Ann Arbor, MI 48104	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	Ī
10/04/2020	A+G Digital	
Amount (\$)	Payee address; City; State; Zip Code	
\$500.00	1318 Minerva Rd	
	Ann Arbor, MI 48104	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Advertising	
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

Advertising Expense E Accounting/Banking Consulting Expense E Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (outer a category pet listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Committee	Gift/Awards/Memorials E Legal Services The Instruction Gui			ages/Contract Labor	Travel Out of D OTHER (enter	a category not listed above)
1	Total pages Schedule F1:	2 FII FD		-			3 Filer ID	(Ethics Commission Filers)
•	Sch: 2/15 Rpt: 17/30		anchan, David				00090478	`
L	<u> </u>	ļ	anchan, David				1 00090478	
4	Date	5 Payee						
	10/18/2020	Bray,	Timothy					
6	Amount (\$)	7 Payee	address; City;	State;	Zip Cod	de		
	\$100.00		Placid Pl	•	-			
	, y							
		Aatia	TV 70701					
		Austir	ı, TX 78731					
8	PURPOSE	(a) Catego	ory (See Categories listed at the	e top of this sche	edule)	(b) Description		
	OF EXPENDITURE	Consu	ılting Expense			=	el outside of Texas. Co	
							in, TX, officeholder livir	ng expense
						Data Project	L	
9	Complete ONLY if direct		te/Officeholder name	Of	ffice soug	jht	Office h	neld
	expenditure to benefit C/OI	П						
	Date	Payee	name					
	10/22/2020	l í	no, Joseph					
\vdash	Amount (\$)	Pavee	address; City;	State:	Zip Cod	de		
	\$720.00	1 1	Longview St	5.0.0,		· -		
	Ψ120.00		_					
		Apt 41						
L		Austir	ı, TX 78705					
	PURPOSE	(a) Catego	Ory (See Categories listed at the	e top of this sche	edule)	(b) Description		
	OF EXPENDITURE	Salari	es/Wages/Contract La	bor		=	el outside of Texas. Co	
						ш	in, TX, officeholder livir	ng expense
						Contractor F	-ee	
	Complete ONLY if direct expenditure to benefit C/OI		te/Officeholder name	Of	ffice soug	jht	Office h	neld
	experiorale to belieff C/OI	· ·						
	Date	Payee	name					
	10/08/2020	Casci	no, Joseph					
	Amount (\$)	Pavee	address; City;	State:	Zip Cod	de		
	\$420.00	1 1	Longview St	5.0.0,		· -		
	Ψ-20.00		•					
		Apt 41						
		Austir	ı, TX 78705					
	PURPOSE	(a) Catego	Ory (See Categories listed at the	e top of this sche	edule)	(b) Description		
	OF EXPENDITURE	Salari	es/Wages/Contract La	bor			el outside of Texas. Co	•
							in, TX, officeholder livir	ng expense
						Contractor F	-ee	
	Complete ONLY if direct		te/Officeholder name	Of	ffice soug	jht	Office h	neld
	expenditure to benefit C/OI	П						

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

sement Solicitation/Fundraising Expense

Gransportation Equipment & Related Expense

Travel in District

Travel Out of District

OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/15 Rpt: 18/30	Chincanchan, David 00090478
4	Date	5 Payee name
	10/23/2020	Coon, Jonathan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$400.00	3939 Bee Caves Road C100
		Austin, TX 78746
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Refund - Exceeded max contribution
		Troiding Exposure max sommistion
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
١	expenditure to benefit C/O	
\vdash	Date	Dougo nama
	10/23/2020	Payee name Coop Kirston
		Coon, Kirsten
	Amount (\$)	Payee address; City; State; Zip Code
	\$400.00	3939 Bee Caves Road C100
		Austin, TX 78746
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Refund - Exceeded max contribution
		Refulld - Exceeded max contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date 10/22/2020	Payee name Davis, Jordan
		·
	Amount (\$)	Payee address; City; State; Zip Code
	\$165.00	9507 Mankay Lane
		Houston, TX 77070
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Contractor Foo
		Contractor Fee
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/15 Rpt: 19/30	Chincanchan, David 00090478
4	Date	5 Payee name
	10/08/2020	Davis, Jordan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$60.00	9507 Mankay Lane
		Houston, TX 77070
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Contractor Fee
		Contractor rec
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OH	
_		
	Date	Payee name
	10/22/2020	Eldaour, Omar
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	1302 Terrace View Dr
		Sugar Land, TX 77479
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Contractor Fee
		Sofia asia 1 co
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	Davies same
	Date 10/22/2020	Payee name
		Figueroa, Iliana
	Amount (\$)	Payee address; City; State; Zip Code
	\$135.00	2608 Shear Water Ct
		League City, TX 77573
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense Contractor Fee
		Contractor Fee
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/15 Rpt: 20/30	Chincanchan, David 00090478
4	Date	5 Payee name
	10/08/2020	Figueroa, Iliana
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$60.00	2608 Shear Water Ct
		League City, TX 77573
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	-	Contractor Fee
		Contractor Fee
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	
	Date	Payee name
	10/09/2020	Gardner, Darnell
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,308.64	3406 Oakdale
		Houston, TX 77004
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Salary
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/23/2020	Gardner, Darnell
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,446.85	3406 Oakdale
	Ψ1,440.03	3400 Oakuale
		Houston TV 77004
		Houston, TX 77004
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Salary
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	d Com	Gi nmittee Le T	ti/Awards/Memorials E gal Services ne Instruction Gui	Expense		pens ages	e /Contract Labor		Travel III District Travel Out of Di OTHER (enter a		ed above)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Com	mission Filers)
	Sch: 6/15 Rpt: 21/30	_	Chincanchan,	David						00090478		
4	Date	5	Payee name									
	10/09/2020		Gusto									
6	Amount (\$)	7	Payee address	City;	State;	Zip Co	de					
	\$969.08		525 20th Stre	et								
			San Fransisco	o, CA 94107								
8	PURPOSE	(a)	Category (See	Categories listed at the	e top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Salaries/Wag	es/Contract Lal	bor			=			plete Schedule T	
								Payroll Taxes		officeholder living	g expense	
								rayiuii iaxes	•			
9	Complete ONLY if direct	<u> </u>	Candidate/Office	holder name		Affice cour	aht			Office h	old	
9	expenditure to benefit C/O		anuluale/Onice	noidei name	O	office sou	ynı			Office fi	eiu	
	Date	Π	Davida nama									
	10/23/2020	l	Payee name Gusto									
				Cit	Ctata	7:- 00	al a					
	Amount (\$)	l	Payee address	•	State,	Zip Co	ue					
	\$969.33		525 20th Stre	eı								
			San Fransisco	o, CA 94107								
	PURPOSE OF			Categories listed at the		edule)	(b)	Description				_
	EXPENDITURE		Salaries/Wag	es/Contract Lal	bor			=		le of Texas. Com officeholder living	iplete Schedule T n expense	
								Payroll Taxes		omeenoider nam	у схрепос	
								,				
	Complete ONLY if direct		Candidate/Office	holder name	0	I) Office soug	ght			Office h	eld	
	expenditure to benefit C/OI	Н					-					
	Date		Payee name									
	10/17/2020	l	Horizon Printi	ng								
	Amount (\$)	_	Payee address		State:	Zip Co	de					
	\$744.76	ı	2111 Grand <i>A</i>		,	- 50	-					
	Ψ110		ZIII Olalia /	,								
			Austin, TX 78	728								
-	PURPOSE			Categories listed at the		11>	(b)	Description				
	OF		Printing Expe		e top of this sche	edule)	(2)		outsid	le of Texas. Com	nplete Schedule T	
	EXPENDITURE		Timung Expc	130				Check if Austin,	, TX,	officeholder living	g expense	
								Printing				
	Complete ONLY if direct		Candidate/Office	holder name	0	office sou	ght			Office h	eld	
L	expenditure to benefit C/O	H										
			·									
	ms provided by Texas E	thio	c Commission	1404	www othics s	tata tv II	_				Varaian	\/2 1 p7h63aaf

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Printing Expense

10/07/2020 Horizon Printing 6 Amount (\$) 7 Payee address; City; State; Zip Code 2111 Grand Ave Pkwy Austin, TX 78728		Credit Card Payment	The Instruction Guide explains how to c	-	ete this form.
Sch: 7/15 Rpt: 22/30 Chincanchan, David 00090478 4 Date	1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Horizon Printing					00090478
10/07/2020	4	Date	5 Payee name		<u> </u>
S744.76 2111 Grand Ave Pkwy Austin, TX 78728 (a) Category (see Categories Islaed at the top of this schedule) Check if framed totaled of Texas. Complete Schedule T. Check if Austin, TX, officeholder Islang expense Printing		10/07/2020			
Austin, TX 78728 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if Austin, TX, officeholder fiving expense Check if Austin, TX, officeholder Check if Austin, TX, officeholde	6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
S		\$744.76	2111 Grand Ave Pkwy		
S					
Printing Expense Check it favel outside of Texas. Complete Schedule T.			Austin, TX 78728		
Printing Expense Check if Austin, TX, officeholder hiring expense	8		(a) Category (See Categories listed at the top of this schedule)	(b)	Description
Printing Complete ONLY if direct expenditure to benefit C/OH Date					
9 Complete ONLY if direct expenditure to benefit C/OH Date 10/03/2020					—
Date 10/03/2020					Filliang
Date 10/03/2020	Ļ	Complete ONLY if direct	Candidate/Officeholder name Office so	uaht	Office held
Amount (\$)				ugnt	Office field
Amount (\$)	⊨	Data			
Amount (\$)					
\$589.96 2111 Grand Ave Pkwy	L				
Austin, TX 78728 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if Iravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing Candidate/Officeholder name Office sought Office held Payee name Horizon Printing Amount (\$) Payee address; City; State; Zip Code 2111 Grand Ave Pkwy Austin, TX 78728 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Office held (b) Description Check if Austin, TX, officeholder Iving expense Printing (b) Description Check if Austin, TX, officeholder Iving expense Printing (check if Austin, TX, officeholder Iving expense) Printing (check if Austin, TX, officeholder Iving expense) Printing Complete ONLY if direct Candidate/Officeholder name Office sought Office held				ode	
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description		\$589.96	2111 Grand Ave Pkwy		
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing Complete ONLY if direct expenditure to benefit C/OH Date Payee name Horizon Printing Amount (\$) Payee address; City; State; Zip Code \$205.68 \$205.68 2111 Grand Ave Pkwy Austin, TX 78728 (a) Category (See Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expense Printing Expense Candidate/Officeholder name Office sought Complete ONLY if direct Candidate/Officeholder name Office sought Complete ONLY if direct Candidate/Officeholder name Office sought Complete ONLY if direct Candidate/Officeholder name Office sought Office held					
Printing Expense Complete ONLY if direct expenditure to benefit C/OH			Austin, TX 78728		
Complete ONLY if direct expenditure to benefit C/OH Date			(a) Category (See Categories listed at the top of this schedule)	(b)	
Complete ONLY if direct expenditure to benefit C/OH Date			Printing Expense		
Complete ONLY if direct expenditure to benefit C/OH Date					—
Date 10/16/2020 Payee name Horizon Printing Amount (\$) Payee address; City; State; Zip Code 2111 Grand Ave Pkwy Austin, TX 78728 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder Iving expense Printing Complete ONLY if direct Candidate/Officeholder name Office sought Office held					3
Date 10/16/2020 Payee name Horizon Printing Amount (\$) Payee address; City; State; Zip Code 2111 Grand Ave Pkwy Austin, TX 78728 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense Printing Complete ONLY if direct Candidate/Officeholder name Office sought Office held	H	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
Amount (\$) Payee address; City; State; Zip Code \$205.68 \$205.68 Purpose OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing Complete ONLY if direct Candidate/Officeholder name Office sought Office held		expenditure to benefit C/OI			
Amount (\$) State; Zip Code \$205.68 Payee address; City; State; Zip Code 2111 Grand Ave Pkwy Austin, TX 78728 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing Complete ONLY if direct Candidate/Officeholder name Office sought Office held	F	Date	Pavee name		
\$205.68 2111 Grand Ave Pkwy Austin, TX 78728 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense Complete ONLY if direct Candidate/Officeholder name Candidate/Officeholder name Office sought Complete See Only if direct Candidate/Officeholder name Office sought Office held		10/16/2020	-		
\$205.68 2111 Grand Ave Pkwy Austin, TX 78728 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense Complete ONLY if direct Candidate/Officeholder name Candidate/Officeholder name Office sought Complete See Only if direct Candidate/Officeholder name Office sought Office held	H	Amount (\$)	Payee address; City; State; Zip C	ode	
Austin, TX 78728 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing Complete ONLY if direct Candidate/Officeholder name Office sought Office held					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing Complete ONLY if direct Candidate/Officeholder name Office sought Office held			,		
OF EXPENDITURE Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Austin, TX 78728		
OF EXPENDITURE Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing Complete ONLY if direct Candidate/Officeholder name Office sought Office held	H	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
Complete ONLY if direct Candidate/Officeholder name Check if Austin, TX, officeholder living expense Printing Office sought Office held				`´	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held		EXPENDITURE	· ·		—
					Printing
	L	0 1. 0		<u> </u>	0"
				ught	Office held
	<u> </u>				

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officebolder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
TTALE (Control of State Control of C

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/15 Rpt: 23/30	Chincanchan, David 00090478
4	Date	5 Payee name
	10/08/2020	Horizon Printing
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$143.97	2111 Grand Ave Pkwy
		Austin, TX 78728
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Printing
		,a
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
-	Date	Payee name
	10/09/2020	Ibarra, Maria
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,727.95	9809 Chuckar Circle
		Austin, TX 78758
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense Salary
		Salary
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Data	
	Date	Payee name
	10/23/2020	Ibarra, Maria
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,727.96	9809 Chuckar Circle
		Austin, TX 78758
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Salary
		Salary
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense

Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 7 1 0 1 1 5	
1 Total pages Schedule F1: Sch: 9/15 Rpt: 24/30	2 FILER NAME Chincanchan, David 3 Filer ID (Ethics Commission Filers) 00090478
4 Date	5 Payee name
10/14/2020	Kelly Graphics
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$3,424.00	1409 Quaker Ridge
	Austin, TX 78746
a Burboos	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Printing, Mail, Postage
	Timung, Mail, Tostage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to belieff Gree	•
Date	Payee name
10/15/2020	Kelly Graphics
Amount (\$)	Payee address; City; State; Zip Code
\$7,111.08	1409 Quaker Ridge
***,===	
	A
	Austin, TX 78746
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Printing, Mail, Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to benefit even	·
Date	Payee name
10/20/2020	Kelly Graphics
Amount (\$)	Payee address; City; State; Zip Code
\$7,111.08	1409 Quaker Ridge
	Austin, TX 78746
DUDD005	1
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Printing, Mail, Postage
	Timung, man, 1 oo aago
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District
OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
Ļ	Sch: 10/15 Rpt: 25/30	Chincanchan, David 00090478
4	Date 10/01/2020	5 Payee name Numero
	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 200 Spectrum Center Drive Suite 300 Irvine, CA 92618
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Processing Fees
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/27/2020	Office Depot
	Amount (\$) \$206.27	Payee address; City; State; Zip Code 816 Tirado St
		Austin, TX 78752
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mailing
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 09/30/2020	Payee name Office Depot
	Amount (\$) \$44.10	Payee address; City; State; Zip Code 816 Tirado St
		Austin, TX 78752
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mailing
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

rsement Solicitation/Fundraising Expense
Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
Labor OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 11/15 Rpt: 26/30	Chincanchan, David		00090478
4	Date	5 Payee name		•
	09/25/2020	Ramirez, Jill		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$50.00	5309 Presidio Rd		
		Austin, TX 78745		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Loan Repayment/Reimbursement		Check if travel outside of Texas. Complete Schedule T.
	LXI ENDITORE			Check if Austin, TX, officeholder living expense
				Refund - Exceeded max contribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
9	Complete ONLY if direct expenditure to benefit C/Ol		grit	Office field
_	Data			
	Date	Payee name		
	10/20/2020	Ranes, Jim		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$787.28	1501 Barton Springs Rd. #233		
		Austin, TX 78704		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Design
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/O	1		
	Date	Payee name		
	10/22/2020	Rodriguez Romero, Laura		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$120.00	520 Woodward St		
		Apt 214		
		Austin, TX 78704		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF	Salaries/Wages/Contract Labor	` '	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	•		Check if Austin, TX, officeholder living expense
				Contractor Fee
	Operated ONE V. T.	Open distant Office had be	1 -	0" 111
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sou	gnt	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Credit Card Baymant

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 12/15 Rpt: 27/30	2 FILER NAME3 Filer ID(Ethics Commission Filers)Chincanchan, David00090478	
4	Date	5 Payee name	_
	10/08/2020	Rodriguez Romero, Laura	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$60.00	520 Woodward St	
		Apt 214	
		Austin, TX 78704	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Salaries/Wages/Contract Labor	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Contractor Fee	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	10/22/2020	Sapien, Juan-Carlos	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$165.00	364 Silver Star	
		El Paso, TX 79912	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Contractor Fee	
		Contractor 1 co	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	_
	10/08/2020	Sapien, Juan-Carlos	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$75.00	364 Silver Star	
	Ψ10.00	SO I SILVEI STALL	
		El Paso, TX 79912	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Contractor Fee	
		Contractor i de	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/15 Rpt: 28/30	Chincanchan, David 00090478
4	Date	5 Payee name
	10/23/2020	Schoenbaum, Alan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	3112 Windsor Rd. Ste A 525
		Austin, TX 78703
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Refund - Exceeded max contribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	10/22/2020	Shafi, Yusuf
	Amount (\$)	Payee address; City; State; Zip Code
	\$210.00	2434 Cloud Peak Lane
		Round Rock, TX 78681
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Contractor Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/08/2020	Shafi, Yusuf
	Amount (\$)	Payee address; City; State; Zip Code
	\$60.00	2434 Cloud Peak Lane
		Round Rock, TX 78681
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Contractor Fee
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	7

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F1:	2 FI	LER NAME			3	3	Filer ID	(Ethics Commission I	Filers)
	Sch: 14/15 Rpt: 29/30	c	hincanchan, David					00090478		
4	Date	5 Pa	ayee name							
	10/23/2020	I	SPS							
6	Amount (\$)	7 Pa	ayee address; City;	State; Zip Co	de					
	\$125.00	45	516 Burleson Rd							
		l A	ustin, TX 78744							
8	PURPOSE	-			(h)	Description				
ľ	OF		ategory (See Categories listed at the to rinting Expense	op of this schedule)	(~)	Check if travel out	tsid	e of Texas. Comp	olete Schedule T.	
	EXPENDITURE					Check if Austin, T.	Χ, α	officeholder living	expense	
						Mailing				
9	Complete ONLY if direct		ndidate/Officeholder name	Office sou	ght			Office he	ld	
L	expenditure to benefit C/OI									
	Date	Pá	ayee name							
	09/27/2020	U	SPS							
	Amount (\$)	Pá	ayee address; City;	State; Zip Co	de					
	\$935.00	45	516 Burleson Rd							
		A	ustin, TX 78744							
Г	PURPOSE	(a) C	ategory (See Categories listed at the to	op of this schedule)	(b)	Description				
	OF EXPENDITURE	1	rinting Expense	,		Check if travel out				
	EXI ENDITORE					Check if Austin, T	Χ, (officeholder living	expense	
						Mailing				
L	Complete ONLY if direct		ndidate/Officeholder name	Office sou	abt			Office he	Id	
	Complete ONLY if direct expenditure to benefit C/Ol		ididate/Oniceriolder name	Office Sou	grit			Office he	iu	
┝	D-1-									
	Date 10/17/2020	1	ayee name SPS							
L										
l	Amount (\$)	l .	ayee address; City;	State; Zip Co	ae					
	\$175.00	4:	516 Burleson Rd							
l		١.								
			ustin, TX 78744							
l	PURPOSE OF		ategory (See Categories listed at the to	pp of this schedule)	(b)	Description	toid	a of Toyon Comm	alata Cabadula T	
l	EXPENDITURE	l Pi	rinting Expense			Check if travel out				
l						Mailing		3		
						-				
Н	Complete ONLY if direct	Car	ndidate/Officeholder name	Office sou	ght			Office he	ld	
	expenditure to benefit C/O	Н								
H										
Ļ										71.00

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Consuling Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Folding Expense Folding Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 15/15 Rpt: 30/30	Chincanchan, David 00090478
4	Date	5 Payee name
	09/25/2020	Workers Defense Project
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	5604 Manor Rd
		Austin, TX 78723
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	LXI LINDITORL	Candidate/Officeholder/Political Committee
		Event Contribution
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held